

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON THE REVERSE OF THE FORM.)

**I. (a) PLAINTIFFS KOHARIG SHAHINIAN**

**DEFENDANTS DEKALB COUNTY SOLUTIONS, INC.**

**(b)** County of Residence of First Listed Plaintiff MONTGOMERY  
(EXCEPT IN U.S. PLAINTIFF CASES)

County of Residence of First Listed Defendant \_\_\_\_\_  
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE LAND INVOLVED.

**(c)** Attorney's (Firm Name, Address, and Telephone Number) Cary L. Flitter, Esq., and Theodore E. Lorenz, Esq., Flitter Lorenz, P.C., 450 N. Narberth Avenue, Suite 101, Narberth, PA 19072, (610) 822-0782

Attorneys (If Known)

**II. BASIS OF JURISDICTION** (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff ☒ 3 Federal Question (U.S. Government Not a Party)
- ☐ 2 U.S. Government Defendant ☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

**III. CITIZENSHIP OF PRINCIPAL PARTIES** (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- |  |  |                            |                            |
|--|--|----------------------------|----------------------------|
| <b>PTF</b>   | <b>DEF</b>   | <b>PTF</b>                 | <b>DEF</b>                 |
| Citizen of This State <input type="checkbox"/> 1                   | <input type="checkbox"/> 1 Incorporated or Principal Place of Business In This State     | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State <input type="checkbox"/> 2                | <input type="checkbox"/> 2 Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country <input type="checkbox"/> 3 | <input type="checkbox"/> 3 Foreign Nation  | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

**IV. NATURE OF SUIT** (Place an "X" in One Box Only)

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input type="checkbox"/> 110 Insurance	<input type="checkbox"/> 310 Airplane	<input type="checkbox"/> 610 Agriculture	<input type="checkbox"/> 422 Appeal 28 USC 158	<input type="checkbox"/> 400 State Reapportionment
<input type="checkbox"/> 120 Marine	<input type="checkbox"/> 315 Airplane Product Liability	<input type="checkbox"/> 620 Other Food & Drug	<input type="checkbox"/> 423 Withdrawal 28 USC 157	<input type="checkbox"/> 410 Antitrust
<input type="checkbox"/> 130 Miller Act	<input type="checkbox"/> 320 Assault, Libel & Slander	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881	<input type="checkbox"/> 424 Bankruptcy 11 USC 541	<input type="checkbox"/> 430 Banks and Banking
<input type="checkbox"/> 140 Negotiable Instrument	<input type="checkbox"/> 330 Federal Employers' Liability	<input type="checkbox"/> 630 Liquor Laws	<input type="checkbox"/> 425 Bankruptcy 11 USC 542	<input type="checkbox"/> 440 Commerce
<input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment	<input type="checkbox"/> 340 Marine	<input type="checkbox"/> 640 R.R. & Truck	<input type="checkbox"/> 426 Bankruptcy 11 USC 543	<input type="checkbox"/> 450 Commerce
<input type="checkbox"/> 151 Medicare Act	<input type="checkbox"/> 345 Marine Product Liability	<input type="checkbox"/> 650 Airline Regs.	<input type="checkbox"/> 427 Bankruptcy 11 USC 544	<input type="checkbox"/> 460 Deportation
<input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excl. Veterans)	<input type="checkbox"/> 350 Motor Vehicle	<input type="checkbox"/> 660 Occupational Safety/Health	<input type="checkbox"/> 428 Bankruptcy 11 USC 545	<input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations
<input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits	<input type="checkbox"/> 355 Motor Vehicle Product Liability	<input type="checkbox"/> 690 Other	<input type="checkbox"/> 429 Bankruptcy 11 USC 546	<input checked="" type="checkbox"/> 480 Consumer Credit
<input type="checkbox"/> 160 Stockholders' Suits	<input type="checkbox"/> 360 Other Personal Injury	<b>LABOR</b>	<input type="checkbox"/> 430 Bankruptcy 11 USC 547	<input type="checkbox"/> 490 Cable/Sat TV
<input type="checkbox"/> 190 Other Contract	<input type="checkbox"/> 370 Other Fraud	<input type="checkbox"/> 710 Fair Labor Standards Act	<input type="checkbox"/> 431 Bankruptcy 11 USC 548	<input type="checkbox"/> 810 Selective Service
<input type="checkbox"/> 195 Contract Product Liability	<input type="checkbox"/> 371 Truth in Lending	<input type="checkbox"/> 720 Labor/Mgmt. Relations	<input type="checkbox"/> 432 Bankruptcy 11 USC 549	<input type="checkbox"/> 850 Securities/Commodities/Exchange
<input type="checkbox"/> 196 Franchise	<input type="checkbox"/> 380 Other Personal Property Damage	<input type="checkbox"/> 730 Labor/Mgmt. Reporting & Disclosure Act	<input type="checkbox"/> 433 Bankruptcy 11 USC 550	<input type="checkbox"/> 875 Customer Challenge 12 USC 3410
<b>REAL PROPERTY</b>	<input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 740 Railway Labor Act	<input type="checkbox"/> 434 Bankruptcy 11 USC 551	<input type="checkbox"/> 890 Other Statutory Actions
<input type="checkbox"/> 210 Land Condemnation	<b>CIVIL RIGHTS</b>	<input type="checkbox"/> 790 Other Labor Litigation	<input type="checkbox"/> 435 Bankruptcy 11 USC 552	<input type="checkbox"/> 891 Agricultural Acts
<input type="checkbox"/> 220 Foreclosure	<input type="checkbox"/> 441 Voting	<input type="checkbox"/> 791 Empl. Ret. Inc. Security Act	<input type="checkbox"/> 436 Bankruptcy 11 USC 553	<input type="checkbox"/> 892 Economic Stabilization Act
<input type="checkbox"/> 230 Rent Lease & Ejectment	<input type="checkbox"/> 442 Employment		<input type="checkbox"/> 437 Bankruptcy 11 USC 554	<input type="checkbox"/> 893 Environmental Matters
<input type="checkbox"/> 240 Torts to Land	<input type="checkbox"/> 443 Housing/Accommodations		<input type="checkbox"/> 438 Bankruptcy 11 USC 555	<input type="checkbox"/> 894 Energy Allocation Act
<input type="checkbox"/> 245 Tort Product Liability	<input type="checkbox"/> 444 Welfare		<input type="checkbox"/> 439 Bankruptcy 11 USC 556	<input type="checkbox"/> 895 Freedom of Information Act
<input type="checkbox"/> 290 All Other Real Property	<input type="checkbox"/> 445 Amer. w/Disabilities - Employment	<b>PRISONER PETITIONS</b>	<input type="checkbox"/> 440 Bankruptcy 11 USC 557	<input type="checkbox"/> 900 Appeal of Fee Determination Under Equal Access to Justice
	<input type="checkbox"/> 446 Amer. w/Disabilities - Other	<input type="checkbox"/> 510 Motions to Vacate Sentence	<input type="checkbox"/> 441 Bankruptcy 11 USC 558	<input type="checkbox"/> 950 Constitutionality of State Statutes
	<input type="checkbox"/> 440 Other Civil Rights	<b>Habeas Corpus:</b>	<input type="checkbox"/> 442 Bankruptcy 11 USC 559	
		<input type="checkbox"/> 530 General	<input type="checkbox"/> 443 Bankruptcy 11 USC 560	
		<input type="checkbox"/> 535 Death Penalty	<input type="checkbox"/> 444 Bankruptcy 11 USC 561	
		<input type="checkbox"/> 540 Mandamus & Other	<input type="checkbox"/> 445 Bankruptcy 11 USC 562	
		<input type="checkbox"/> 550 Civil Rights	<input type="checkbox"/> 446 Bankruptcy 11 USC 563	
		<input type="checkbox"/> 555 Prison Condition	<input type="checkbox"/> 447 Bankruptcy 11 USC 564	

**V. ORIGIN** (Place an "X" in One Box Only)

☒ 1 Original Proceeding ☐ 2 Removed from State Court ☐ 3 Remanded from Appellate Court ☐ 4 Reinstated or Reopened

Transferred from ☐ 5 another district (specify) ☐ 6 Multidistrict Litigation ☐ 7 Appeal to District Judge from Magistrate Judgment

**VI. CAUSE OF ACTION**

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):

Brief description of cause: FDCPA 15 USC § 1692

**VII. REQUESTED IN COMPLAINT:**

☐ CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23

**DEMAND \$**

CHECK YES only if demanded in complaint  
**JURY DEMAND:** ☒ Yes ☐ No.

**VIII. RELATED CASE(S) IF ANY**

(See instructions):

JUDGE

DOCKET NUMBER

DATE 12/19/14 SIGNATURE OF ATTORNEY OF RECORD 

FOR OFFICE USE ONLY

RECEIPT # \_\_\_\_\_ AMOUNT \_\_\_\_\_ APPLYING IFP \_\_\_\_\_ JUDGE \_\_\_\_\_ MAG. JUDGE \_\_\_\_\_

**FOR THE EASTERN DISTRICT OF PENNSYLVANIA — DESIGNATION FORM** to be used by counsel to indicate the category of the case for the purpose of assignment to appropriate calendar.

Address of Plaintiff: 304 Heathcliffe Road, Huntingdon Valley, PA 19006-8706

Address of Defendant: 240 W. Page Street, Sycamore, IL 60178

Place of Accident, Incident or Transaction: 304 Heathcliffe Road, Huntingdon Valley, PA 19006-8706

(Use Reverse Side For Additional Space)

Does this civil action involve a nongovernmental corporate party with any parent corporation and any publicly held corporation owning 10% or more of its stock?  
(Attach two copies of the Disclosure Statement Form in accordance with Fed.R.Civ.P. 7.1(a)) Yes ☐ No ☒

Does this case involve multidistrict litigation possibilities? Yes ☐ No ☒

RELATED CASE, IF ANY:

Case Number: \_\_\_\_\_ Judge \_\_\_\_\_ Date Terminated: \_\_\_\_\_

Civil cases are deemed related when yes is answered to any of the following questions:

1. Is this case related to property included in an earlier numbered suit pending or within one year previously terminated action in this court?  
Yes ☐ No ☒
2. Does this case involve the same issue of fact or grow out of the same transaction as a prior suit pending or within one year previously terminated action in this court?  
Yes ☐ No ☒
3. Does this case involve the validity or infringement of a patent already in suit or any earlier numbered case pending or within one year previously terminated action in this court?  
Yes ☐ No ☒

CIVIL: (Place ☒ in ONE CATEGORY ONLY)

**A. Federal Question Cases:**

1. ☐ Indemnity Contract, Marine Contract, and All Other Contracts
2. ☐ FELA
3. ☐ Jones Act-Personal Injury
4. ☐ Antitrust
5. ☐ Patent
6. ☐ Labor-Management Relations
7. ☐ Civil Rights
8. ☐ Habeas Corpus
9. ☐ Securities Act(s) Cases
10. ☐ Social Security Review Cases
11. ☒ All other Federal Question Cases  
(Please specify) FDCPA, 15 USC § 1692

**B. Diversity Jurisdiction Cases:**

1. ☐ Insurance Contract and Other Contracts
2. ☐ Airplane Personal Injury
3. ☐ Assault, Defamation
4. ☐ Marine Personal Injury
5. ☐ Motor Vehicle Personal Injury
6. ☐ Other Personal Injury (Please specify)
7. ☐ Products Liability
8. ☐ Products Liability (Asbestos)
9. ☐ All other Diversity Cases  
(Please specify)

**ARBITRATION CERTIFICATION**

(Check appropriate Category)

I, \_\_\_\_\_, counsel of record do hereby certify:

☐ Pursuant to Local Civil Rule 53.2, Section 3(c)(2), that to the best of my knowledge and belief, the damages recoverable in this civil action case exceed the sum of \$150,000.00 exclusive of interest and costs;

☐ Relief other than monetary damages is sought

DATE: \_\_\_\_\_ Attorney-at-Law \_\_\_\_\_ Attorney I.D. \_\_\_\_\_

**NOTE:** A trial de novo will be a trial by jury only if there has been compliance with F.R.C.P. 38.

I certify that, to my knowledge, the within case is not related to any case now pending or within one year previously terminated action in this court except as noted above.

DATE: 12/19/14 \_\_\_\_\_ 207715  
CIV.609 (4/03) Attorney-at-Law Attorney I.D.

## APPENDIX I

**IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

**CASE MANAGEMENT TRACK DESIGNATION FORM**

KOHARIG SHAHINIAN	:	CIVIL ACTION
	:	
V.	:	
	:	
DEKALB COUNTY SOLUTIONS, INC.	:	NO.

In accordance with the Civil Justice Expense and Delay Reduction Plan of this court, counsel for plaintiff shall complete a case Management Track Designation Form in all civil cases at the time of filing the complaint and serve a copy on all defendants. (See § 1:03 of the plan set forth on the reverse side of this form.) In the event that a defendant does not agree with the plaintiff regarding said designation, that defendant shall, with its first appearance, submit to the clerk of court and serve on the plaintiff and all other parties, a case management track designation form specifying the track to which that defendant believes the case should be assigned.

**SELECT ONE OF THE FOLLOWING CASE MANAGEMENT TRACKS:**

- (a) Habeas Corpus – Cases brought under 28 U.S.C. §2241 through §2255. (     )
- (b) Social Security – Cases requesting review of a decision of the Secretary of Health and Human Services denying plaintiff Social Security Benefits (     )
- (c) Arbitration – Cases required to be designated for arbitration under Local Civil Rule 53.2. (   X  )
- (d) Asbestos – Cases involving claims for personal injury or property damage from exposure to asbestos. (     )
- (e) Special Management – Cases that do not fall into tracks (a) through (d) that are commonly referred to as complex and that need special or intense management by the court. (See reverse side of this form for a detailed explanation of special management cases) (     )
- (f) Standard Management – Cases that do not fall into any one of the other tracks. (     )

12/19/14  
Date

  
Attorney at Law

ANDREW M. MILZ  
Attorney for Plaintiff

(610) 822-0782  
Telephone  
(Civ.660) 10/02

(610) 667-0552  
Fax Number

Amilz@consumerslaw.com  
E-Mail Address

**IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

KOHARIG SHAHINIAN  
304 Heathcliffe Road  
Huntingdon Valley, PA 19006-8706,  
Plaintiff,

vs.

DEKALB COUNTY SOLUTIONS, INC.  
240 W. Page Street  
Sycamore, IL 60178

Defendant

CIVIL ACTION

NO.

**COMPLAINT**

**I. INTRODUCTION**

1. This is an action for damages brought by a consumer pursuant to the Fair Debt Collection Practices Act, 15 U.S.C. § 1692 (“FDCPA”).

2. The FDCPA prohibits debt collectors from engaging in unfair or unconscionable practices in the collection of a consumer debt.

3. Defendant is subject to strict liability for sending a collection letter that exposes personal identifying information visibly on the envelope placed into the mails.

**II. JURISDICTION**

4. Subject matter jurisdiction of this Court arises under 15 U.S.C. §1692k, actionable through 28 U.S.C. §§1331 and 1337.

5. Venue is proper as defendant regularly does business in this district and has caused harm in this district.

### **III. PARTIES**

6. Plaintiff Koharig Shahinian (“Plaintiff” or “Shahinian”) is a consumer who resides in Huntingdon Valley, Pennsylvania at the address captioned.

7. Defendant DeKalb County Solutions, Inc. (“Defendant” or “DeKalb”) is a nationwide debt collector with a principal place of business at the address captioned.

8. Defendant regularly engages in the collection of consumer debts using the mails and telephone.

9. Defendant regularly attempts to collect consumer debts alleged to be due another.

10. Defendant is a “debt collector” as that term is contemplated in the FDCPA, 15 U.S.C. § 1692a(6).

### **IV. STATEMENT OF CLAIM**

11. On or about March 25, 2014, Defendant DeKalb mailed a collection notice to Plaintiff in an attempt to collect a consumer debt alleged due. A copy of the March 25, 2014 letter is attached hereto as Exhibit A (redacted in part per Fed. R. Civ. P. 5.2).

12. The alleged debt was used primarily for personal, family or household use.

13. The collection letter was mailed by DeKalb to Plaintiff in a window envelope.

14. Visible through the glassine window of the envelope placed into the mails was the financial account number that Defendant assigned to Plaintiff and her account.

15. The financial account number (ending in 1882) constitutes personal identifying information.

16. The FDCPA prohibits the use of unfair or unconscionable means to collect or attempt to collect a debt, including the use of any language or symbol other than the debt

collector's name and address on any envelope when communicating with a consumer by mail. 15 U.S.C. § 1692f(8).

17. This prohibition applies to markings that are visible through a transparent window of an envelope.

18. The account number is a piece of information capable of identifying Shahinian as a debtor, and its disclosure has the potential to cause harm to a consumer that the FDCPA was enacted to address.

**COUNT I**  
**(FAIR DEBT COLLECTION PRACTICES ACT)**

19. Plaintiff repeats the allegations contained above as if the same were here set forth at length.

20. Defendant's acts described above violated the Fair Debt Collection Practices Act by the use of language or a symbol on any envelope when communicating with a consumer by mail, in violation of 15 U.S.C. § 1692f(8).

**WHEREFORE**, Plaintiff Koharig Shahinian demands judgment against Defendant DeKalb County Solutions, Inc. for:

- (a) Damages;
- (b) Attorney's fees and costs; and
- (c) Such other and further relief as the Court shall deem just and proper.

**VII. JURY DEMAND**

Pursuant to Fed.R.Civ.P. 38, Plaintiff demands trial by jury as to all issues so triable.

Respectfully submitted:

DATE:

12/19/14

A handwritten signature in black ink, appearing to read 'Cary L. Flitter', is written over a horizontal line.

CARY L. FLITTER  
THEODORE E. LORENZ  
ANDREW M. MILZ  
Attorneys for Plaintiff

**FLITTER LORENZ, P.C.**  
450 N. Narberth Avenue, Suite 101  
Narberth, PA 19072  
(610) 822-0782

# **EXHIBIT "A"**



P.O. Box 188  
Sycamore, IL 60178  
RETURN SERVICE REQUESTED



March 25, 2014

1882-2299813-48/000820

KOHARIG SHAHINIAN  
304 HEATHCLIFFE RD  
HUNTINGDON VALLEY, PA 19006-8706



**DCS**  
**DeKalb County Solutions, Inc.**

P.O. Box 447, Sycamore, Illinois 60178

Toll-Free: (877) 688-8288

Web: <http://www.dekalbcountysolutions.com>

Amount Enclosed: \$ \_\_\_\_\_  
Please send check or money order to:

DCS  
P.O. Box 447  
Sycamore, IL 60178

You can also pay on-line at [www.dekalbcountysolutions.com](http://www.dekalbcountysolutions.com)

DCS Account #: 1882  
Original Account #: 1882-2299813-48/000820  
Original Creditor: HOUSEHOLD BANK  
Purchased Balance: \$1,117.67  
Interest since Purchased: \$507.98  
Payments Received: \$0.00  
Current Balance: \$1,625.65  
Settlement Offer: \$950.02  
Total Due: \$950.02

DCS would like to offer you a settlement on your HOUSEHOLD BANK account. For a one-time payment of \$950.02, your account will be settled in full. Once paid, you will receive a settled-in-full letter stating your account has been settled in full to keep for your records. However, this offer will be null and void after 04/24/2014 and the full balance (including interest) of \$1,625.65 will be due. If the settlement offer is paid by 04/24/2014, your account will be settled in full with no further obligation! If, however, the settlement offer is not paid by 04/24/2014 we will then review your account and proceed with appropriate collection efforts in accordance with the state and federal law for the full balance (including interest) of \$1,625.65.

Please check one of the following options suggested below and mail or fax this form no later than 04/24/2014:

- ☐ I wish to take advantage of this offer and I have enclosed the settlement amount of: \$ \_\_\_\_\_.
- ☐ I wish to take advantage of this offer and would like to pay by telephone using check or credit card.  
Please call (877) 688-8288 Ex:113 to by telephone.
- ☐ I can not take advantage of this settlement offer at this time. However, I will make monthly payments of \$100.00 until the full balance (including interest) of \$1,625.65 is paid.
- ☐ I can not take advantage of this offer at this time, however, please call me at \_\_\_\_\_ to discuss other possible payment arrangements.

**OR, Pay online using credit card or electronic check! It's fast and secure.**  
Visit [www.dekalbcountysolutions.com](http://www.dekalbcountysolutions.com) to pay online today!

Please feel free to contact me at (877) 688-8288 Ex:113 between the hours of 8:00 AM and 8:00 PM (CDT) if you have any questions or would like to discuss other possible payment arrangements.

Sincerely,  
Kristine Johnson  
Account Representative

This is an attempt to collect a debt and any information obtained will be used for that purpose. This is a communication from a debt collector.

IF YOU WISH TO PAY BY CREDIT CARD, (CIRCLE ONE) FILL IN THE INFORMATION BELOW AND RETURN THE ENTIRE LETTER TO US IN THE ENCLOSED ENVELOPE.  
WE ACCEPT CHECK BY PHONE. (877) 688-8288



Account Number

Expire Date

\$

Payment Amount

Card Holder Name

Phone Number

Signature